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Examiner Signature	/Clark Dexter/	Date Considered	12/07/2009
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Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>			Complete if Known <table border="1"> <tr> <td>Application Number</td> <td>TBA</td> </tr> <tr> <td>Filing Date</td> <td>October 28, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>Kenji OTODA, et al.</td> </tr> <tr> <td>Art Unit</td> <td>TBA</td> </tr> <tr> <td>Examiner Name</td> <td>TBA</td> </tr> <tr> <td>Attorney Docket Number</td> <td>49288.1600</td> </tr> </table>		Application Number	TBA	Filing Date	October 28, 2005	First Named Inventor	Kenji OTODA, et al.	Art Unit	TBA	Examiner Name	TBA	Attorney Docket Number	49288.1600
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Sheet	2	of	2													

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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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